

Substitute for form 1449/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

*(use as many sheets as necessary)*

**Complete if Known**

Application Number	10/522,807
Filing Date	1/31/2005
First Named Inventor	Tsuyoshi SHIINA
Group Art Unit	3736
Examiner Name	
Attorney Docket Number	44708X00

## NON PATENT LITERATURE DOCUMENTS

[illegible]

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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